## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

6 -

## STATEMENT OF ECONOMIC INTERESTS RECEDENCE USE ONLY

COVER PAGE

FEB 2 3 2011

Please type or print in ink.	2	011 MAR 22 AM 9: 45	City of Cypress City Clerk's Office	
NAME OF FILER	(LAST)	(FIRST)	City Clerk's Office (MIDDLE)	
BAILEY		DOUGLAS	A.	
1. Office, Agency, or Court				
Agency Name				
City of Cypress				
Division, Board, Department, Distric	t, if applicable	Your Position		
		City Council	Member	
► If filing for multiple positions, list	below or on an attachment.			
Agency: Orange County Fire	Authority	Position: Alterr	nate Board Member	
2. Jurisdiction of Office (Ch	eck at least one box)			
☐ State		☐ Judge (Statewic	de Jurisdiction)	
Multi-County		County of Ora	ange	
City of Cypress		Other		
2 Tune of Statement (charle	A to a to a second			
3. Type of Statement (Check	•	Secretarios Of Deputing Office	P-1-1-4	
Annual: The period covered is 2010.	January 1, 2010, through	(Check one)	e: Date Left/	
The period covered is2010.	, through C	ecember 31, O The period leaving office	covered is January 1, 2010, through the date of ce.	
Assuming Office: Date	J	<ul><li>The period of leaving of</li></ul>	covered is/, through the date office.	
Candidate: Election Year	Office	sought, if different than Part 1:		
4. Schedule Summary				
Check applicable schedules or "N	lone."	► Total number of pages	including this cover page:2	
Schedule A-1 - Investments -	schedule attached	Schedule C - Income	e, Loans, & Business Positions – schedule attached	
Schedule A-2 - Investments -	schedule attached		e - Gifts - schedule attached	
Schedule B - Real Property -	schedule attached	Schedule E - Income	e - Gifts - Travel Payments - schedule attached	
-or- None - No reportable interests on any schedule				
herein and in any attached schedule	es is true and complete. I a	cknowledge this is a		
I certify under penalty of perjury	under the laws of the Stat	e of California that		
Date Signed February	23, 2011	Signature		
(month, da	y, year)	Orginatal -		
		1.7 III 118		

## SCHEDULE D Income - Gifts



Name

**Douglas Bailey** 

► NAME OF SOURCE	► NAME OF SOURCE		
Forest Lawn Memorial Park	Aleshire & Wynder		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
4471 Lincoln Avenue, Cypress, CA 90630	1515 W. 190th St., Ste. 565, Gardena, CA 90248		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Cemetery Services	Law Firm		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
12 , 13 , 10 <sub>\$</sub> 50.00 Poinsettia Plant	09 , 16 , 10		
\$	\$		
/ \$			
► NAME OF SOURCE	▶ NAME OF SOURCE		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
/ \$			
► NAME OF SOURCE	NAME OF SOURCE		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
	\$		
	\$		
Comments:			